| No. C 206176 | | Due no later than Jun 30, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. MUSCLE CHANNEL MASSAGE LTD 5080 W TARGEE ST BOISE ID 83705 | | 2 | 2. Registered Agent and Address (NO PO BOX) | | | |
|---|----------|---|------------------------------------|-----------|---|-------|---------|-------------|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF | | | | | CARMEN LATINA 5080 W. TARGEE ST BOISE ID 83705 3. New Registered Agent Signature:* | | | |
| 4. Corporations: Enter Nar | | ess Addresses of Preside | nt, Secretary, and Directors. Trea | asurer (o | ptional). | | | |
| Office Held | Name | | Street or PO Address | | City | State | Country | Postal Code |
| PRESIDENT | CARMEN R | LATINA | 5080 W TARGEE ST | | BOISE | ID | USA | 83705 |
| 5. Organized Under the Laws of: | | 6. Annual Report must be signed.* | | | | | | |
| ID | | Signature: CARMEN LATINA | | | Date: 05/30/2016 | | | |
| C 206176 | | Name (type or print): CARMEN LATINA | | | Title: PRES | | | |
| Processed 05/30/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |